

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: 1
 (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
 (4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
 Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
 Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Steve Olson

Political Party (if applicable)

Republican

Office Sought

State Representative

District (if Senate or House)

83

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Kathy Phillips
 SIGNATURE OF PERSON FILING REPORT

563-659-5175
 TELEPHONE

11/1/07
 DATE RECEIVED
 NOV - 1 2007

I AM FILING A November 3, 2006

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR

Indicate by # 1

☒ CHECK IF AMENDMENT TO REPORT DATED 11/3/2006

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
 (You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

7,861.63

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below).....

4,575.00

Schedule F: Loans Received total (Attach Schedule F).....

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H).....

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$ 12,436.63

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below).....

10,891.00

Schedule F: Loan Repayments total (Attach Schedule F).....

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3).....\$

1,545.63

**UNPAID BILLS (From Schedule D - Attach Schedule D)\$ 1530.00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)\$ 0.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

SCHEDULE
D
(Rev. 08/98) INCURRED
INDEBTEDNESS

☒ CHECK THIS BOX
IF AMENDING
FORM

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS - SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
6/1/06- 7/14/06	Steve Olson DeWitt, IA 52742	960 miles @ .34/mi	\$ 326.40
7/15/06- 10/14/06	Steve Olson DeWitt, IA 52742	2940 miles @ .34/mi	999.60
10/15/06- 10/31/06	Steve Olson DeWitt, IA 52742	600 miles @ .34/mi	204.00
SUB-TOTAL			\$ 1530.00
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1530.00

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

"Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

11/3/06 report

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE**COMMITTEE NAME** (Must be same as on Statement of Organization)

Steve Olson for State Representative

IMPORTANT. Indicate by # type of committee you are reporting for: 1(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue**CANDIDATE COMMITTEES ONLY**Candidate Name
Steve OlsonOffice Sought
State RepresentativePolitical Party (if applicable)
RepublicanDistrict (if Senate or House)
83**ETHICS & CAMPAIGN
DISCLOSURE BOARD**

JAN 17 2007

FILED

**FORM
DR-2**

(Rev. 12/2005)

**DISCLOSURE
REPORT****For Office Use Only**

Comm. #

Logged In

Scanned

Computer

Audited

File with:

Iowa Ethics and Campaign
Disclosure Board
510 E. 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Kathy Rollins

SIGNATURE OF PERSON FILING REPORT

563-659-5175
TELEPHONE1-17-07
DATE SIGNEDI AM FILING A November 3, 2006 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1☒ CHECK IF AMENDMENT TO REPORT DATED November 3, 2006☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the
committee. This amount **MUST** be the same as the cash on hand at the end
of the last reporting period or must be zero if this is first report filed.)

\$ 7,861.63

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

4,575.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 12,436.63

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

10,861.00

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must
be zero) (Attach DR-3)

\$ 1,545.63

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 0.00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 1,863.25

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

SCHEDULE
E
(Rev. 06/97)IN-KIND
CONTRIBUTIONS☒ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/18/06	Republican Party of Iowa 621 East 9th Des Moines, IA 50309		Direct Mail Design & Postage	\$ 1,863.25	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

IA ETHICS & CAMPAIGN
DISCLOSURE BOARD
JAN 17 2007
FILED

SUB-TOTAL \$ 1,863.25

TOTAL (If last
page of this
schedule) \$ 1,863.25

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Steve Olson

Political Party (if applicable)

Republican

Office Sought

State Representative

District (if Senate or House)

83

PDF e-mail

FORM

DR-2

(Rev. 12/2005)

DISCLOSURE

REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

1387

e

✓

WRS

10-3-07 e

File with:

Iowa Ethics and Campaign

Disclosure Board

510 E. 12th, Ste. 1A

Des Moines, Iowa 50319

Fax: 515-281-3701

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Kathy Elling
SIGNATURE OF PERSON FILING REPORT

563-659-5175
TELEPHONE

11/1/06
DATE SIGNED

I AM FILING A November 3, 2006

(report date)

REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED amended report

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 7,861.63

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

4,575.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 12,436.63

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

10,891.00

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

CASH ON HAND at the end of this reporting period (if final report balance must be zero) (Attach DR-3)

\$ 1,545.63

**UNPAID BILLS (From Schedule D - Attach Schedule D) \$ 0.00

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) \$ 0.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F) \$ 0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 88B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/20/06	ID# CK#	Unitemized contribution		\$25.00	<input type="checkbox"/>
10/20/06	ID# CK#	Molly Carroll 417 Riverview Terrace Bettendorf IA 52722		100.00	<input type="checkbox"/>
10/20/06	ID# 6475 CK# 2734	Casey's PAC PO Box 3001 Ankeny, IA 50021-8045		250.00	<input type="checkbox"/>
10/20/06	ID# 9744 8468 CK# 1585	21st Century Freedom PAC 355 Lexington Ave New York, NY 10017		500.00	<input type="checkbox"/>
10/20/06	ID# 9726 8480 CK# 1039	Golden Grain Energy PAC 1822 43rd ST SW Mason City, IA 5041		100.00	<input type="checkbox"/>
10/20/06	ID# 1987 8478 CK# 1037	Siouxland Energy/Livestock Coop PAC 3890 Garfield Avenue Sioux Center, Iowa 51250		100.00	<input type="checkbox"/>
10/25/06	ID# 9748 CK# 1031	Midwest PAC 1636 NW 114th Street Clive, IA 50325-7071		500.00	<input type="checkbox"/>
10/25/06	ID# 9726 8480 CK# 1049	Golden Grain Energy PAC 1822 43rd ST SW Mason City, IA 5041		300.00	<input type="checkbox"/>
10/25/06	ID# CK# 3105	David Brezina 2006 Q Avenue Traer, IA 50675-9395		200.00	<input type="checkbox"/>
10/25/06	ID# CK# 5161	Julie Vande Vegte 2032 220th Street Inwood, IA 51240		250.00	<input type="checkbox"/>

SUB-TOTAL

\$ 2,325.00

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/25/06	ID# CK# 16305	Ross Wiley 2801 51st St Vinton, IA 52349		\$250.00	<input type="checkbox"/>
10/20/06	ID# CK# 5294	Donald Endres 919 Christine Ave Brookings, SD 57006		250.00	<input type="checkbox"/>
10/31/06	ID# CK# 2676	Sally McGauvran 2 Curtis Drive Clinton, IA 52732		100.00	<input type="checkbox"/>
✓ 10/31/06	ID# 6162 CK# 1382	Iowa Agribusiness Employees PAC #6162 900 Des Moines Street, Des Moines, IA 50309		300.00	<input type="checkbox"/>
✓ 10/31/06	ID# 9743 CK# 102	Iowa Turkey Federation PAC #9743 PO Box 825 Ames, IA 50010-0825		500.00	<input type="checkbox"/>
✓ 10/31/06	ID# 6001 CK# 4570000041	Allied Group and Farmland PAC 1100 Locust Rd Des Moines, IA 50391		250.00	<input type="checkbox"/>
✓ 10/31/06	ID# 6038 CK# 234	Verizon Iowa State Good Government Club 11 Eleventh Ave Suite 2 Grinnell, IA 50112		100.00	<input type="checkbox"/>
✓ 10/31/06	ID# 6027 CK# 2516	Deere PAC #6027 666 Grand Ave Suite 1707 Des Moines, IA 50309		500.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 2,250.00

TOTAL (if last page of this schedule)

\$ 4,575.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM



EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/15/06	ID# CK# 1166	US Postal 618 9th Street DeWitt, IA 52742	stamps	\$ 156.00
10/20/06	ID# <u>9161</u> CK# 1167	Legislative Majority Fund 521 E Locust Des Moines, IA 50309	donation to assist in electing Republican candidates	5,000.00
10/20/06	ID# CK# 1168	Clinton Herald 221 6th Avenue s Clinton, IA 52732	Newspaper advertising	366.00
10/20/06	ID# CK# 1169	Treasurer, State of Iowa State Capitol Building Des Moines, IA 50319	2 US Flags, 2 Iowa Flags	88.00
10/25/06	ID# <u>9161</u> CK# 1170	Legislative Majority Fund 521 E Locust Des Moines, IA 50309	donation to assist in electing Republican candidates	1,500.00
10/26/06	ID# <u>9161</u> CK# 1171	Legislative Majority Fund 521 E Locust Des Moines, IA 50309	donation to assist in electing Republican candidates	2,500.00
10/30/06	ID# <u>9161</u> CK# 1172	Legislative Majority Fund 521 E Locust Des Moines, IA 50309	donation to assist in electing Republican candidates	1,000.00
10/30/06	ID# CK# 1173	US Postal 618 9th Street DeWitt, IA 52742	stamps	156.00
SUB-TOTAL				\$ 10,766.00
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Steve Olson for State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/31/06	ID# CK# 1174	Victory Enterprises 5200 S.W. 30th Davenport, IA 52802	creation and production of radio ad	\$ 125.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 125.00
TOTAL (if last page of this schedule)				\$ 10,891.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

(for Schedule B)